

| POSITION                  | INITIALS | ID NO.           | DATE     |
|---------------------------|----------|------------------|----------|
| FEE DETERMINATION         |          |                  |          |
| O.I.P.E. CLASSIFIER       | M        |                  | 10-31-00 |
| FORMALITY REVIEW          |          | 7025177<br>06390 | 12-30-01 |
| RESPONSE FORMALITY REVIEW | LIT      |                  | 12-30-01 |

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 - ..... Restricted O ..... Objected

| Claim | Date | Claim    | Date | Claim | Date |
|-------|------|----------|------|-------|------|
| Final |      | Original |      |       |      |
| 1     | ✓    | 51       |      | 101   |      |
| 2     | ✓    | 52       |      | 102   |      |
| 3     |      | 53       |      | 103   |      |
| 4     |      | 54       |      | 104   |      |
| 5     |      | 55       |      | 105   |      |
| 6     |      | 56       |      | 106   |      |
| 7     |      | 57       |      | 107   |      |
| 8     |      | 58       |      | 108   |      |
| 9     |      | 59       |      | 109   |      |
| 10    |      | 60       |      | 110   |      |
| 11    |      | 61       |      | 111   |      |
| 12    |      | 62       |      | 112   |      |
| 13    |      | 63       |      | 113   |      |
| 14    |      | 64       |      | 114   |      |
| 15    |      | 65       |      | 115   |      |
| 16    |      | 66       |      | 116   |      |
| 17    |      | 67       |      | 117   |      |
| 18    |      | 68       | ✓    | 118   |      |
| 19    |      | 69       |      | 119   |      |
| 20    |      | 70       |      | 120   |      |
| 21    |      | 71       |      | 121   |      |
| 22    |      | 72       |      | 122   |      |
| 23    |      | 73       |      | 123   |      |
| 24    |      | 74       |      | 124   |      |
| 25    |      | 75       |      | 125   |      |
| 26    |      | 76       |      | 126   |      |
| 27    |      | 77       |      | 127   |      |
| 28    |      | 78       |      | 128   |      |
| 29    |      | 79       |      | 129   |      |
| 30    |      | 80       |      | 130   |      |
| 31    |      | 81       |      | 131   |      |
| 32    |      | 82       |      | 132   |      |
| 33    |      | 83       |      | 133   |      |
| 34    |      | 84       |      | 134   |      |
| 35    |      | 85       |      | 135   |      |
| 36    |      | 86       |      | 136   |      |
| 37    |      | 87       |      | 137   |      |
| 38    |      | 88       |      | 138   |      |
| 39    |      | 89       |      | 139   |      |
| 40    |      | 90       |      | 140   |      |
| 41    |      | 91       |      | 141   |      |
| 42    |      | 92       |      | 142   |      |
| 43    |      | 93       |      | 143   |      |
| 44    |      | 94       |      | 144   |      |
| 45    |      | 95       |      | 145   |      |
| 46    |      | 96       |      | 146   |      |
| 47    |      | 97       |      | 147   |      |
| 48    |      | 98       |      | 148   |      |
| 49    |      | 99       |      | 149   |      |
| 50    |      | 100      |      | 150   |      |

If more than 150 claims or 10 actions  
staple additional sheet here